

CERTIFICATE OF AMENDMENT

Deputy Secretary of State

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SECOND: Describe **NATURE OF CHANGE** (i.e. change in name of corporation, purpose, change in officers or contact person, number of directors, adding or deleting section or revision of section of the Certificate of Organization, etc.) as well as **TEXT** of amendment. Attach additional pages as needed.

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

THIRD: ("X" one box only.) The amendment was adopted on (date) _____ as follows:

- ☐ By the members at a meeting at which a quorum was present and the amendment received at least a majority of the votes which members were entitled to cast.
- ☐ (If no members or none entitled to vote thereon.) By majority vote of the whole board of directors or trustees or managing board, however designated, taken at any legal meeting.

AUTHORIZED SIGNATURE*:

DATED _____

(signature of secretary or clerk)

(type or print name and capacity)

*This document **MUST** be signed by the secretary or clerk of the corporation. ([13 MRSA §934](#))

Please remit your payment made payable to the Secretary of State.

Submit Completed form to: **Secretary of State**
Division of Corporations, UCC and Commissions
101 State House Station
Augusta, Me 04333-0101
Telephone Inquiries: **(207) 624-7752** Email Inquiries: CEC.Corporations@Maine.gov

Filer Contact Cover Letter

To: Department of the Secretary of State
Division of Corporations, UCC and Commissions
101 State House Station
Augusta, ME 04333-0101

Tel. (207) 624-7752

Name of Entity (s):

List type of filing(s) enclosed (i.e. Articles of Incorporation, Articles of Merger, Articles of Amendment, Certificate of Correction, etc.) Attach additional pages as needed.

Special handling request(s): (check all that apply)

- ☐ Hold for pick up
☐ Expedited filing - 24 hour service (\$50 additional filing fee per entity, per service)
☐ Expedited filing - Immediate service (\$100 additional filing fee per entity, per service)

Total filing fee(s) enclosed: \$ _____

Contact Information – questions regarding the above filing(s), please call or email: (failure to provide a contact name and telephone number or email address will result in the return of the erroneous filing (s) by the Secretary of State's office)

(Name of contact person)

(Daytime telephone number)

(Email address)

The enclosed filing(s) and fee(s) are submitted for filing. Please return the attested copy to the following address:

(Name of attested recipient)

(Firm or Company)

(Mailing Address)

(City, State & Zip)